

## Application Data Sheet

### Application Information

Application Type:: Non-Provisional  
Subject Matter::  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?::  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: Method And System For Interfacing  
With Accounting Systems  
Attorney Docket Number:: 60655.1000  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 3  
Small Entity?:: No  
Latin name::  
Variety denomination name::  
Petition included?::  
Petition Type::  
Licensed US Govt. Agency:: No  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

### Applicant Information

Applicant Authority Type::  
Primary Citizenship Country:: U.S.  
Status::  
Given Name:: Lawrence  
Middle Name:: J.  
Family Name:: Mika

Name Suffix::  
 City of Residence:: Wood Dale  
 State or Province of Residence:: Illinois  
 Country of Residence:: U.S.A.  
 Street of mailing address:: 395 Crestwood Court  
 City of mailing address:: Wood Dale  
 State or Province of mailing address:: Illinois  
 Country of mailing address:: U.S.  
 Postal or Zip Code of mailing address:: 60191

#### Correspondence Information

Correspondence Customer Number:: 20322  
 Name:: Thomas V. DelRosario  
 Street of mailing address:: One Arizona Center  
 400 E. Van Buren  
 City of mailing address:: Phoenix  
 State or Province of mailing address:: Arizona  
 Country of mailing address:: U.S.  
 Postal or Zip Code of mailing address:: 85004-2202  
 Phone number:: 602-382-6219  
 Fax Number:: 602-382-6070  
 E-mail address:: tdelrosario@swlaw.com

#### Representative Information

Representative Customer Number::	20322	
Representative Designation::	Registration Number:: 46,658	Representative Name:: Thomas V. DelRosario

#### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name:: American Express Travel Related  
Services Company, Inc.  
Street of mailing address:: American Express Tower  
World Financial Center  
City of mailing address:: New York  
State or Province of mailing address:: NY  
Country of mailing address:: United States  
Postal or Zip Code of mailing address:: 10285-4900